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FROM: Otis Littlefield (Reg. No. 48,751)

DATE: November 1, 2006

Number of pages with cover page:	20
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**Contents of this Transmission:**

Inventor: Dan M. GRANOFF et al.		Atty Docket No.: 223002100100	
Application No.:	09/701,453	Filing Date:	April 16, 2001
Group Art Unit	1645	Examiner:	S. J. N. Devi
Title:	COMBINATION MENINGITIDIS B/C VACCINES		
<b>Documents Filed:</b>			
Transmittal (1 page)			
Fee Transmittal w/duplicate copy for fee processing (2 pages)			
Petition for Extension of Time (1 page)			
Amendment (15 pages)			
Facsimile Return Receipt Cover			
Sender's Initials	OBL1/jxh3	Mailing Date:	November 1, 2006

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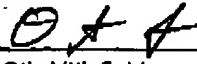
PTO/SB/21 (08-04)

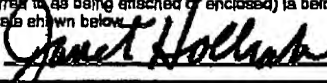
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<b>TRANSMITTAL FORM</b>  <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/701,453	
	Filing Date	April 16, 2001	
	First Named Inventor	Dan M. GRANOFF	
	Art Unit	1645	
	Examiner Name	S. J. N. Devi	
Total Number of Pages in This Submission	19	Attorney Docket Number	223002100100

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form w/duplicate copy for fee processing (2 pages) <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply (15 pages) <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request (1 page) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Facsimile Return Receipt Cover
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Firm Name	MORRISON & FOERSTER LLP (Customer No. 20872)		
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FEE TRANSMITTAL For FY 2006		Complete If Known																																																							
<p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p> <p><b>TOTAL AMOUNT OF PAYMENT</b> (\$) 1,020.00</p>		Application Number	09/701,453																																																						
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<p><b>METHOD OF PAYMENT</b> (check all that apply)</p> <p> <input type="checkbox"/> Check    <input type="checkbox"/> Credit Card    <input type="checkbox"/> Money Order    <input type="checkbox"/> None    <input type="checkbox"/> Other (please identify): _____         </p> <p> <input checked="" type="checkbox"/> Deposit Account    Deposit Account Number <u>03-1852</u>    Deposit Account Name: <u>Morrison &amp; Foerster LLP</u> </p> <p>For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)</p> <p> <input checked="" type="checkbox"/> Charge fee(s) indicated below    <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee  <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17    <input checked="" type="checkbox"/> Credit any overpayments         </p>																																																									
<p><b>FEE CALCULATION</b> (All the fees below are due upon filing or may be subject to a surcharge.)</p>																																																									
<p><b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">Application Type</th> <th colspan="2">FILING FEES</th> <th colspan="2">SEARCH FEES</th> <th colspan="2">EXAMINATION FEES</th> <th rowspan="2">Fees Paid (\$)</th> </tr> <tr> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>Utility</td> <td>300</td> <td>150</td> <td>500</td> <td>250</td> <td>200</td> <td>100</td> <td></td> </tr> <tr> <td>Design</td> <td>200</td> <td>100</td> <td>100</td> <td>50</td> <td>130</td> <td>65</td> <td></td> </tr> <tr> <td>Plant</td> <td>200</td> <td>100</td> <td>300</td> <td>150</td> <td>160</td> <td>80</td> <td></td> </tr> <tr> <td>Reissue</td> <td>300</td> <td>150</td> <td>500</td> <td>250</td> <td>600</td> <td>300</td> <td></td> </tr> <tr> <td>Provisional</td> <td>200</td> <td>100</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td></td> </tr> </tbody> </table>				Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Utility	300	150	500	250	200	100		Design	200	100	100	50	130	65		Plant	200	100	300	150	160	80		Reissue	300	150	500	250	600	300		Provisional	200	100	0	0	0	0	
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<p><b>3. APPLICATION SIZE FEE</b></p> <p>If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(c)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(a).</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Total Sheets</th> <th>Extra Sheets</th> <th>Number of each additional 50 or fraction thereof</th> <th>Fee (\$)</th> <th>Fees Paid (\$)</th> </tr> </thead> <tbody> <tr> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> <td>0</td> </tr> </tbody> </table>				Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fees Paid (\$)	_____	_____	_____	_____	0																																												
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_____	_____	_____	_____	0																																																					
<p><b>4. OTHER FEE(S)</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>Fees Paid (\$)</th> </tr> </thead> <tbody> <tr> <td>Non-English Specification, \$130 fee (no small entity discount)</td> <td>0</td> </tr> <tr> <td>Other (e.g., late filing surcharge): 1253 Extension for response within third month</td> <td>1,020.00</td> </tr> </tbody> </table>					Fees Paid (\$)	Non-English Specification, \$130 fee (no small entity discount)	0	Other (e.g., late filing surcharge): 1253 Extension for response within third month	1,020.00																																																
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<p><b>SUBMITTED BY</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>Signature</td> <td></td> <td>Registration No. (Attorney/Agent)</td> <td>48,751</td> <td>Telephone</td> <td>(415) 268-6848</td> </tr> <tr> <td>Name (Print/Type)</td> <td>Otis Littlefield</td> <td>Date</td> <td colspan="3">November 1, 2006</td> </tr> </table>				Signature		Registration No. (Attorney/Agent)	48,751	Telephone	(415) 268-6848	Name (Print/Type)	Otis Littlefield	Date	November 1, 2006																																												
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